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### Gender research

## Policies, politics and gender research

**Concha Colomer-Revuelta, Rosana Peiró-Pérez, Rosa M López-Rodríguez, Isabel Espiga-López, Isabel Sáiz-Martínez-Acitores, Isabel Soriano-Villarroel**

### Development of research on gender and health is scarce

Today, the importance of adopting a gender approach is widely acknowledged when it comes to planning and assessing policies, programmes and health services. But it is also obvious, on the other hand, that development of research on gender and health, and on women's health, that allows taking action to be based on scientific knowledge, is rather scarce.

More and more frequently research results are presented, either broken down by sex, or sex is included as a variable for study and analysis. We know that this is still insufficient for understanding health inequalities arising from gender, and for taking steps to reduce them. Gender issues are giving rise to growing interest, but their study has been kept away from

medicine, for which the concern has chiefly been biology (sex and not gender), and where the broadly adopted model has been male disease. On close inspection, it may be seen that, broadly speaking, resources devoted to health and gender research in Spain have been, up until recently, rather scarce, both in terms of personnel and funding and, hence, yielded poor results<sup>1</sup> and limited application to policies.<sup>2</sup> Present development stems from the initiative, back at the end of the 1990s, of creating a task force within the Spanish Society of Public Health and Healthcare Administration (SESPAS).<sup>3</sup> This task force developed an observatory, debating forums at symposiums, and the inclusion of gender inequalities in SESPAS reports.<sup>4 5</sup>

In 2002, within the framework of convening research networks, at the "Carlos III" Health Institute—the Spanish agency for biomedical research—the Research Network for Health and Gender (RISG)<sup>6</sup> was created. Throughout recent years the RISG has helped to promote this kind of research, conducting and spreading studies and training female researchers. This supplement is intended to promote international dissemination of a part of that work carried out to contribute to the general knowledge of these subjects and to be shared by interested people and organisations in other countries.

Research on gender and health in Spain has been strengthened since 2005 by its priority line funding in national research grant proposal convening. This comes as a result of a Spanish government equality policy that establishes specific measures for action, targeting achievement of equality objectives in all sectors.<sup>7</sup> In the case of the Ministry of Health and Consumer Affairs, this translated into the creation of the Observatory on Women's Health dependent on the National Health System's Quality Agency and into the inclusion of gender equity in the Quality Plan for the National Health System.<sup>8</sup>

Political support at the highest level also allows other actions that are relevant for

research purposes, such as revision of information services, in health and within the healthcare system, to achieve whatever information be broken down by sex, and the inclusion of variables enabling research on gender inequalities.<sup>9-10</sup> Also this support helps in the process of devising and financing the research, ranging from improving the quality of the applications, and designing of studies on gender and health, to gender awareness in application assessment processes. At all stages, shortcomings have been detected that have set in motion actions such as training and methodological support to emerging health and gender research teams. In this sense, the Observatory on Women's Health is working to develop a series of guidelines for gender mainstreaming in the different stages of research. The first, about research policies, is already available.<sup>11</sup>

Publication of research results, specifically in scientific journals, is basic for knowledge dissemination. It has been shown that gender stereotypes have some impact in this field by hindering women's works.<sup>12</sup>

These actions are expected to come to completion in the oncoming years, thus contributing to a deepened understanding of the magnitude and causes of gender inequalities in Spain, as well as in the whole scientific world, and hence providing knowledge for the kind of political action that may enable ongoing progress towards these inequalities reduction, to thrive on.

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## GALLERY

### Doctor Aleu, the first woman doctor in Spain



Doctor Dolors Aleu

**D**octor Dolors Aleu (Barcelona, 1857-1913) was the first woman to study medicine in Spain. She completed her university education in 1879 but was not granted permission to take the graduation exam until 1882, when she also obtained her doctorate. She fought single handedly to achieve a medical degree, moved by the conviction that denying access to it was an act of social injustice towards women. "Despite there being so many social concerns, we are denied instruction, and the poor women who actually make the superhuman effort of reaching the fountains of science are constantly ridiculed..."

In her doctoral thesis, entitled "On the need to set the hygienic and moral education of women on a new course," she harshly criticised discrimination against women in all realms of life, the social hypocrisy that bans women from education, arguing that they are weak and have to bear the burden of families, while neither is taken into account when it comes to putting them to work like dogs on farms or in factories, as well as the unhealthiness of female attire, particularly corsets.

Dr Aleu married and had two children, but this did not prevent her from practising medicine until her death at the age of 56.

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